FS-2700-3a (09/2020) OMB No. 0596-0082

U.S. DEPARTMENT OF AGRICULTURE FOREST SERVICE

REQUEST FOR REVOCATION OF A SPECIAL USE AUTHORIZATION

I/We, the undersigned holder/s of a special use authori (hereinafter "authorization"), authorizing use and occup forrequesting revocation of the authorization because we	zation dated, authorization ID pancy of National Forest System (NFS) lands (hereinafter "the use and occupancy"), are are planning to:
	n and date below that box. The form is then complete
Discontinue the use and occupancy without and in ownership or control of the holder.	y transfer of title to the authorized improvements or a change
HOLDER NAME [name of person authorized to sign on behalf of holder, if holder is an entity]	HOLDER NAME
Date:	Date:
☐ Convey all my/our right, title, and interest in the "authorized improvements") to the person/s ide	e improvements covered by the authorization (hereinafter entified below:
	ed improvements and retain title to the authorized er that contract with the individual/s or entity identified
Transfer ownership or control of the business e identified below:	entity that holds the authorization to the individual/s or entity
[Print name on line]	[Print name on line]
Address:	Address:
Telephone Number: () -	Telephone Number: () -
Email:	Email:

I/We understand that the authorization terminates upon a change in ownership of the authorized improvements or upon a change in ownership or control of the business entity that holds the authorization, as provided in the authorization.

Accordingly, I/we have informed the prospective transferee/s or purchaser/s that (1) the authorization is not transferable; (2) the prospective transferee/s or purchaser/s must submit a special use application using form SF-299 and obtain a new special use authorization for the use and occupancy; and (3) the prospective transferee/s or purchaser/s must coordinate with the authorized officer for the authorization (authorized officer) and apply for a new special use authorization for the use and occupancy sufficiently in advance of the transfer or contract execution to allow the authorized officer to process the application for a new special use authorization and, if the authorized officer grants the application, to issue a new special use authorization to the prospective transferee/s or purchaser/s concurrently with the transfer or contract execution.

I/We will coordinate the transfer or contract execution with the authorized officer to allow the authorized officer to process the application for a new special use authorization for the use and occupancy and, if the authorized officer grants the application, to issue a new special use authorization to the prospective transferee/s or purchaser concurrently with the transfer or contract execution. I/We will provide a copy of a bill of sale, deed, or other documentation of the transfer or contract execution upon completion.

HOLDER NAME [name of person authorized to sign on behalf of holder, if holder is an entity]	HOLDER NAME	
Date:	Date:	

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond, to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0082. Response to this collection of information is mandatory. The authority to collect the information is the Organic Administration Act, 16 U.S.C. 551. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible agency or USDA's TARGET Center at (202) 720-2600 (voice and TYY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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